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FILED

10/10/2007

UNITED STATES DISTRICT COURT FOR THE
NORTHERN DISTRICT OF ILLINOIS

JUN 12 2008 aaw

MICHAEL W. BOBBINS
CLERK, U.S. DISTRICT COURTIN FORMA PAUPERIS APPLICATION
AND
FINANCIAL AFFIDAVITClarence Trotter
Plaintiff

v.

Terry L. McCann, et al.
Defendant(s)CASE NUMBER 08C2917JUDGE Matthew F. Kennelly

Wherever is included, please place an X into whichever box applies. Wherever the answer to any question requires more information than the space that is provided, attach one or more pages that refer to each such question number and provide the additional information. Please PRINT:

1. _____, declare that I am the plaintiff petitioner movant (other _____) in the above-entitled case. This affidavit constitutes my application to proceed without full prepayment of fees, or in support of my motion for appointment of counsel, or both. I also declare that I am unable to pay the costs of these proceedings, and that I am entitled to the relief sought in the complaint/petition/motion/appeal. In support of this petition/application/motion/appeal, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? Yes No (If "No," go to Question 2)
 I.D. # AV3323 Name of prison or jail: Stateville
 Do you receive any payment from the institution? Yes No Monthly amount: approx \$0.00

2. Are you currently employed? Yes No
 Monthly salary or wages: N/A
 Name and address of employer: N/A
 a. If the answer is "No":
 Date of last employment: approx 1996
 Monthly salary or wages: \$45.00 per month
 Name and address of last employer: Menard Correctional Center

b. Are you married? Yes No
 Spouse's monthly salary or wages: N/A
 Name and address of employer: N/A

3. Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same residence received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.

a. Salary or wages Yes No
 Amount N/A Received by N/A

b. Business, profession or other self-employment Yes No
 Amount N/A Received by N/A

c. Rent payments, interest or dividends Yes No
 Amount N/A Received by N/A

d. Pensions, social security, annuities, life insurance, disability, workers' compensation, unemployment, welfare, alimony or maintenance or child support Yes No
 Amount N/A Received by N/A

e. Gifts or inheritances Yes No
 Amount N/A Received by N/A

f. Any other sources (state source: N/A) Yes No
 Amount N/A Received by N/A

4. Do you or anyone else living at the same residence have more than \$200 in cash or checking or savings accounts? Yes No Total amount: N/A
 In whose name held: N/A Relationship to you: N/A

5. Do you or anyone else living at the same residence own any stocks, bonds, securities or other financial instruments? Yes No
 Property: N/A Current Value: N/A
 In whose name held: N/A Relationship to you: N/A

6. Do you or anyone else living at the same residence own any real estate (houses, apartments, condominiums, cooperatives, two-flats, three-flats, etc.)? Yes No
 Address of property: N/A
 Type of property: N/A Current value: N/A
 In whose name held: N/A Relationship to you: N/A
 Amount of monthly mortgage or loan payments: N/A
 Name of person making payments: N/A

7. Do you or anyone else living at the same residence own any automobiles, boats, trailers, mobile homes or other items of personal property with a current market value of more than \$1000? Yes No
 Property: N/A
 Current value: N/A
 In whose name held: N/A Relationship to you: N/A

8. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute monthly to their support. If none, check here No dependents
N/A
N/A

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: June 2, 2008

Clarence Trotter
Signature of Applicant

Clarence Trotter
(Print Name)

NOTICE TO PRISONERS: A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account--prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE
(Incarcerated applicants only)
(To be completed by the institution of incarceration)

I certify that the applicant named herein, Clarence Trotter, I.D.# A 63323, has the sum of \$ — 2.11 on account to his/her credit at (name of institution) Stateville CC.

I further certify that the applicant has the following securities to his/her credit: —. I further certify that during the past six months the applicant's average monthly deposit was \$ 38.55.

(Add all deposits from all sources and then divide by number of months).

6-4-08

DATE

T. C.
SIGNATURE OF AUTHORIZED OFFICER

T. Cerricione
(Print name)

Date: 6/4/2008

Time: 10:25am

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Trust Fund

Inmate Transaction Statement

REPORT CRITERIA - Date: 12/04/2007 thru End: Inmate: A63323: Active Status Only ? : No; Print Restrictions ? : Yes;
 Transaction Type: All Transaction Types; Print Furloughs / Restitutions ? : Yes; Include Inmate Totals ? : Yes; Print Balance Errors Only ? : No

Inmate: A63323 Trotter, Clarence

Housing Unit: STA-C -06-45

Date	Source	Transaction Type	Batch	Reference #	Description	Amount	Balance
					Beginning Balance:		27.16
12/04/07	Point of Sale	60 Commissary	3387142	515716	Commissary	-5.69	21.47
12/10/07	Disbursements	90 Medical Co-Pay	344390	Chk #137569	C1206015, DOC: 523 Fund Inmate, Inv. Date: 12/06/2007	-2.00	19.47
12/10/07	Point of Sale	60 Commissary	3447137	516718	Commissary	-19.47	.00
12/12/07	Payroll	20 Payroll Adjustment	346190		P/R month of 11/2007	8.84	8.84
12/14/07	Disbursements	84 Library	348390	Chk #137608	C1212097, DOC: 523 Fund Librar, Inv. Date: 12/12/2007	-.70	8.14
12/14/07	Disbursements	84 Library	348390	Chk #137608	C1212101, DOC: 523 Fund Librar, Inv. Date: 12/12/2007	-.40	7.74
12/18/07	Point of Sale	60 Commissary	352783	518246	Commissary	-6.54	1.20
12/28/07	Disbursements	84 Library	362390	Chk #137928	J1225744, DOC: 523 Fund Librar, Inv. Date: 12/25/2007	-.05	1.15
01/03/08	Point of Sale	60 Commissary	003783	519747	Commissary	-1.02	.13
01/04/08	Mail Room	01 MO/Checks (Not Held)	0042164	2448460	Brown, Caterria	25.00	25.13
01/09/08	Payroll	20 Payroll Adjustment	009190		P/R month of 12/2007	8.16	33.29
01/11/08	Point of Sale	60 Commissary	0117137	520851	Commissary	-30.51	2.78
01/21/08	Point of Sale	60 Commissary	0217137	522251	Commissary	-2.29	.49
02/08/08	Payroll	20 Payroll Adjustment	039190		P/R month of 01/2008	10.00	10.49
02/08/08	Mail Room	01 MO/Checks (Not Held)	039237	10652	Concordia IBF Grievances	17.90	28.39
02/11/08	Point of Sale	60 Commissary	0427137	525120	Commissary	-23.99	4.40
02/18/08	Point of Sale	60 Commissary	0497142	526411	Commissary	-4.36	.04
02/21/08	Mail Room	01 MO/Checks (Not Held)	0522175	A911137	Aguayo, David	40.00	40.04
03/03/08	Point of Sale	60 Commissary	0637142	527555	Commissary	-36.54	3.50
03/04/08	Mail Room	01 MO/Checks (Not Held)	0642176	93426761070	Owens, John	50.00	53.50
03/10/08	Point of Sale	60 Commissary	0707142	528662	Commissary	-52.84	.66
03/10/08	Payroll	20 Payroll Adjustment	070190		P/R month of 02/2008	9.52	10.18
03/14/08	Disbursements	84 Library	074390	Chk #139293	J0311718, DOC: 523 Fund Librar, Inv. Date: 03/11/2008	-.15	9.03
03/17/08	Point of Sale	60 Commissary	0777142	529828	Commissary	-7.56	1.47
04/07/08	Payroll	20 Payroll Adjustment	098190		P/R month of 03/2008	8.16	9.63
04/15/08	Point of Sale	60 Commissary	106720	532711	Commissary	-9.61	.02
04/29/08	Mail Room	01 MO/Checks (Not Held)	1202175	11165080803	Becemil, Maria	50.00	50.02
05/06/08	Disbursements	80 Postage	127337	Chk #140305	J0502050, DOC: 523 Fund Inmate, Inv. Date: 05/02/2008	-.41	49.61
05/08/08	Point of Sale	60 Commissary	1297135	535843	Commissary	-41.65	7.96
05/13/08	Payroll	20 Payroll Adjustment	1341148		P/R month of 04/2008	3.74	11.70
05/16/08	Point of Sale	60 Commissary	1377137	537670	Commissary	-11.62	.08

Total Inmate Funds:	.08
Less Funds Held For Orders:	.00
Less Funds Restricted:	2.25
Funds Available:	-2.17
Total Furloughs:	.00
Total Voluntary Restitutions:	.00

Date: 6/4/2008

Time: 10:25am

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Stateville Correctional Center

Trust Fund

Inmate Transaction Statement

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Inmate: A63323 Trotter, Clarence

Housing Unit: STA-C -06-45

RESTRICTIONS

Invoice Date	Invoice Number	Type	Description	Vendor	Amount
05/22/2008	w522 033	Disb	Library	2 DOC: 523 Fund Library	\$1.65
05/27/2008	w 0527 048	Disb	Library	2 DOC: 523 Fund Library	\$0.70
Total Restrictions:					\$2.25